

<i>SERFF Tracking Number:</i>	<i>HRLV-125637566</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Harleysville Mutual Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>CPDMW050208-2</i>		
<i>TOI:</i>	<i>01.0 Property</i>	<i>Sub-TOI:</i>	<i>01.0001 Commercial Property (Fire and Allied Lines)</i>
<i>Product Name:</i>	<i>CP</i>		
<i>Project Name/Number:</i>	<i>CP Fuel Oil Dealers/</i>		

Filing at a Glance

Company: Harleysville Mutual Insurance Company

Product Name: CP	SERFF Tr Num: HRLV-125637566	State: Arkansas
TOI: 01.0 Property	SERFF Status: Closed	State Tr Num: EFT \$50
Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)	Co Tr Num: CPDMW050208-2	State Status: Fees verified and received
Filing Type: Form	Co Status:	Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
	Author: Carol Zwoyer	Disposition Date: 05/13/2008
	Date Submitted: 05/07/2008	Disposition Status: Approved
Effective Date Requested (New): 06/15/2008		Effective Date (New): 06/15/2008
Effective Date Requested (Renewal): 06/15/2008		Effective Date (Renewal): 06/15/2008

State Filing Description:

General Information

Project Name: CP Fuel Oil Dealers	Status of Filing in Domicile:
Project Number:	Domicile Status Comments:
Reference Organization:	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 05/13/2008	
State Status Changed: 05/13/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	
We wish to submit nonstandard endorsement CP-7174 (Ed. 01-08) Fuel Oil Dealers Property Endorsement.	

Company and Contact

Filing Contact Information

SERFF Tracking Number: HRLV-125637566 State: Arkansas
Filing Company: Harleysville Mutual Insurance Company State Tracking Number: EFT \$50
Company Tracking Number: CPDMW050208-2
TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)
Product Name: CP
Project Name/Number: CP Fuel Oil Dealers/

Carol Zwoyer, Senior State Filing Analyst czwoyer@harleysvillegroup.com
355 Maple Avenue (215) 256-5735 [Phone]
Harleysville, PA 19438-2297 (215) 256-5678[FAX]

Filing Company Information

Harleysville Mutual Insurance Company CoCode: 14168 State of Domicile: Pennsylvania
355 Maple Avenue Group Code: 253 Company Type:
Harleysville, PA 19438 Group Name: State ID Number:
(215) 256-5000 ext. [Phone] FEIN Number: 23-0902325

SERFF Tracking Number:	HRLV-125637566	State:	Arkansas
Filing Company:	Harleysville Mutual Insurance Company	State Tracking Number:	EFT \$50
Company Tracking Number:	CPDMW050208-2		
TOI:	01.0 Property	Sub-TOI:	01.0001 Commercial Property (Fire and Allied Lines)
Product Name:	CP		
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Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Harleysville Mutual Insurance Company	\$50.00	05/07/2008	20146126

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	05/13/2008	05/13/2008

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Disposition

Disposition Date: 05/13/2008

Effective Date (New): 06/15/2008

Effective Date (Renewal): 06/15/2008

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number:	HRLV-125637566	State:	Arkansas
Filing Company:	Harleysville Mutual Insurance Company	State Tracking Number:	EFT \$50
Company Tracking Number:	CPDMW050208-2		
TOI:	01.0 Property	Sub-TOI:	01.0001 Commercial Property (Fire and Allied Lines)
Product Name:	CP		
Project Name/Number:	CP Fuel Oil Dealers/		

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	COVER LETTER	Approved	Yes
Form	Fuel Oil Dealers Property Endorsement	Approved	Yes

<i>SERFF Tracking Number:</i>	<i>HRLV-125637566</i>	<i>State:</i>	<i>Arkansas</i>
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<i>TOI:</i>	<i>01.0 Property</i>	<i>Sub-TOI:</i>	<i>01.0001 Commercial Property (Fire and Allied Lines)</i>
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Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Fuel Oil Dealers Property Endorsement	CP-7174	01-08	Endorsement/New Amendment/Conditions			CP-7174 ed 01-08.pdf

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

FUEL OIL DEALERS PROPERTY ENDORSEMENT

This endorsement modifies insurance provided under the following:

COMMERCIAL PROPERTY COVERAGE PART – BUILDING AND PERSONAL PROPERTY COVERAGE FORM

The following are ADDED to Section A. Coverage, subsection 4. Additional Coverages of the Building and Personal Property Coverage Form:

Terminal Access Card

We will also pay for direct physical loss or damage of your petroleum products, or the petroleum products of others charged to you and for which you are liable, resulting from the unauthorized use of a "terminal access card" that is lost or stolen during the policy period.

This Additional Coverage does not apply to loss or damage caused by or resulting from:

- (1)** Dishonest or criminal acts committed by you, your partners, employees, directors, trustees, authorized representatives or anyone to whom you entrust the "terminal access card";
 - a.** Acting alone or in collusion with others; or
 - b.** Whether or not occurring during the hours of employment.

- (2)** Use of the card or voluntary parting with the "terminal access card" by you or anyone else to whom you have entrusted the card, unless such use is induced by violence or the threat of violence.

The most we will pay for loss or damage under this Terminal Access Card Additional Coverage is \$25,000. All loss resulting from a series of similar or related uses of a terminal access card shall be considered to be one loss.

Definition

"terminal access card" is defined as an imprinted card or a key or other locking device for use by an authorized person which provides access for the purpose of activating an otherwise locked petroleum products pump.

Credit Card Forgery

We will also pay for loss resulting directly from "forgery" or alteration of a written instrument to pay a sum certain in currency, in conjunction with any credit, debit or charge card issued to you or any of your employees for business purposes.

The most we will pay for all loss caused by any person or in which that person is involved, whether the loss involves one or more instruments, is \$2,500.

We will not pay for loss:

- (1)** resulting from the unauthorized use of a lost or stolen "terminal access card" as defined above; or
- (2)** resulting from any dishonest or criminal act committed by you, your partners or any of your employees, directors or trustees whether acting alone or in collusion with other persons and whether performing services for you or otherwise; or
- (3)** arising from any credit, debit or charge card if you have not complied fully with the provisions, conditions or other terms under which the card was issued; or
- (4)** that is an indirect result of any act covered by this insurance, including, but not limited to, loss resulting from:

- (a) Your inability to realize income that you would have realized had there been no loss as covered by this additional coverage; or
- (b) Payment of damages of any type for which you are legally liable, but we will pay compensatory damages arising directly from a loss covered under this additional coverage; or
- (c) Payment of costs, fees or expenses you incur establishing the existence or the amount of loss under this insurance

Transfer Of Your Rights Of Recovery Against Others To Us

You must transfer to us all your rights of recovery against any person or organization for any loss you sustained and for which we have paid or settled. You must also do everything necessary to secure those rights and do nothing after loss to impair them.

Additional Conditions

a. Electronic And Mechanical Signatures

We will treat signatures that are produced or reproduced electronically, mechanically or by other means the same as handwritten signatures.

b. Proof Of Loss

You must include with your proof of loss any instrument involved in that loss, or, if that is not possible, an affidavit setting forth the amount and cause of loss.

c. Territory

We will cover loss that you sustain resulting directly from an "occurrence" taking place anywhere in the world.

d. Policy Term

We will pay only for covered loss discovered no later than one year from the expiration or termination date of the policy.

Definition

"Forgery" means the signing of the name of another person or organization with intent to deceive; it does not mean a signature which consists in whole or in part of one's own name signed with or without authority, in any capacity, for any purpose.

Petroleum Products Contamination

We will also pay up to \$30,000 of your Business Personal Property limit for direct physical loss or damage of your petroleum products at the premises shown in the Declaration caused by contamination.

We will pay such loss only if:

1. The contamination is the direct result of the temporary, unusual and rapid accumulation or runoff of surface water from any source;
2. The contamination takes place during the policy period; and
3. You discover the loss and report the loss to us in writing not later than one hundred eighty (180) days from the date of the loss or from the end of the policy period, whichever comes first.

A \$250 deductible per occurrence applies.

Wrong Delivery of Petroleum Products

We will also pay up to \$30,000 of your Business Personal Property limit for direct physical loss or damage of your liquid petroleum products that are destroyed or rendered unusable as the direct result of delivery of your products into the wrong container or as a direct result of the erroneous delivery of one petroleum product for another.

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Rate Information

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Supporting Document Schedules

Satisfied -Name:	Uniform Transmittal Document-Property & Casualty	Review Status:	Approved	05/13/2008
Comments:				
Attachment:				
NAIC 2007.pdf				

Satisfied -Name:	COVER LETTER	Review Status:	Approved	05/13/2008
Comments:				
Attachment:				
CP Fuel Oil Dealers - form.pdf				

Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only a. Date the filing is received: b. Analyst: c. Disposition: d. Date of disposition of the filing: e. Effective date of filing: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">New Business</div> <div style="width: 55%;"></div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">Renewal Business</div> <div style="width: 55%;"></div> </div> f. State Filing #: g. SERFF Filing #: h. Subject Codes
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3. Group Name	Group NAIC #

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Harleysville Mutual Insurance Company	PA	14168	23-0902325	

5. Company Tracking Number	125637566
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Carol Zwayer 355 Maple Avenue Harleysville, PA 19438	Senior State Filing Analyst	800-523-6344 ext. 5735	215-256-5678	czwayer@harleysville group.com

7. Signature of authorized filer	
8. Please print name of authorized filer	Carol Zwayer

Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	Commercial Property
10. Sub-Type of Insurance (Sub-TOI)	
11. State Specific Product code(s)(if applicable)[See State Specific Requirements]	
12. Company Program Title (Marketing title)	
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14. Effective Date(s) Requested	New: 06/15/2008 Renewal: 6/15/2008

Property & Casualty Transmittal Document---

15.	Reference Filing?	<input type="checkbox"/> Yes <input type="checkbox"/> No
16.	Reference Organization (if applicable)	
17.	Reference Organization # & Title	
18.	Company's Date of Filing	5/7/08
19.	Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved
20.	This filing transmittal is part of Company Tracking #	125637566
21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]	

We wish to submit nonstandard endorsement CP-7174 (Ed. 01-08) Fuel Oil Dealers Property Endorsement. This endorsement will add coverage for fraudulent acts, including unauthorized use of terminal distribution cards, forgery, petroleum products contamination, and wrongful delivery of petroleum products for eligible classes of business listed in our manual.

Rule of application: These changes shall be applicable to all policies effective on or after June 15, 2008.

22.	Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
<div style="margin-bottom: 20px;"> Check #: EFT Amount: 50.00 </div> <p>Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</p>	

*****Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**

HARLEYSVILLE MUTUAL INSURANCE COMPANY

355 Maple Avenue
Harleysville PA 19438-2297
www.harleysvillegroup.com

May 7, 2008

Honorable Julie Benafield Bowman
Commissioner of Insurance
Arkansas Insurance Department
1200 West Third Street
Little Rock, AR 72201-1904

NAIC # 14168
Commercial Property
Form Filing
Company File Number: 125634566

Dear Honorable Bowman:

With this filing it is our intent to submit the following revision to apply to our Commercial Property Program.

We wish to submit nonstandard endorsement CP-7174 (Ed. 01-08) Fuel Oil Dealers Property Endorsement. This endorsement will add coverage for fraudulent acts, including unauthorized use of terminal distribution cards, forgery, petroleum products contamination, and wrongful delivery of petroleum products for eligible classes of business listed in our manual.

Attached: CP-7174 (Ed. 01-08) Fuel Oil Dealers Property Endorsement

Rule of application: These changes shall be applicable to all policies effective on or after June 15, 2008.

Your favorable approval will be appreciated.

Very truly yours



Carol Zwoyer, AAM, AIT
Senior State Filing Analyst
(215) 256-5735
czwoyer@harleysvillegroup.com

CC: Dawn Wrenfrow, Lisa Berke